|  |
| --- |
| **EINGANG GR** |
| GRG Nr. |  |  |  |

Vorname Name

Partei

Adresse

PLZ Ort

## Motion

**„****Titel“**

Der Regierungsrat wird **beauftragt**, Text

**Begründung**

Text

Ort, Datum

Unterzeichnende Person(en)

Mitunterzeichnerinnen und Mitunterzeichner der Motion von Vorname/Name

„Titel“

|  |  |  |  |
| --- | --- | --- | --- |
| **Name / Vorname****(in Blockschrift)** | **Unterschrift** | **Name / Vorname****(in Blockschrift)** | **Unterschrift** |
| 1 |  | 26 |  |
| 2 |  | 27 |  |
| 3 |  | 28 |  |
| 4 |  | 29 |  |
| 5 |  | 30 |  |
| 6 |  | 31 |  |
| 7 |  | 32 |  |
| 8 |  | 33 |  |
| 9 |  | 34 |  |
| 10 |  | 35 |  |
| 11 |  | 36 |  |
| 12 |  | 37 |  |
| 13 |  | 38 |  |
| 14 |  | 39 |  |
| 15 |  | 40 |  |
| 16 |  | 41 |  |
| 17 |  | 42 |  |
| 18 |  | 43 |  |
| 19 |  | 44 |  |
| 20 |  | 45 |  |
| 21 |  | 46 |  |
| 22 |  | 47 |  |
| 23 |  | 48 |  |
| 24 |  | 49 |  |
| 25 |  | 50 |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name / Vorname****(in Blockschrift)** | **Unterschrift** | **Name / Vorname****(in Blockschrift)** | **Unterschrift** |
| 51 |  | 76 |  |
| 52 |  | 77 |  |
| 53 |  | 78 |  |
| 54 |  | 79 |  |
| 55 |  | 80 |  |
| 56 |  | 81 |  |
| 57 |  | 82 |  |
| 58 |  | 83 |  |
| 59 |  | 84 |  |
| 60 |  | 85 |  |
| 61 |  | 86 |  |
| 62 |  | 87 |  |
| 63 |  | 88 |  |
| 64 |  | 89 |  |
| 65 |  | 90 |  |
| 66 |  | 91 |  |
| 67 |  | 92 |  |
| 68 |  | 93 |  |
| 69 |  | 94 |  |
| 70 |  | 95 |  |
| 71 |  | 96 |  |
| 72 |  | 97 |  |
| 73 |  | 98 |  |
| 74 |  | 99 |  |
| 75 |  | 100 |  |